

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For

IS THIS AN AMENDMENT? Yes X No

assistance in completing this form, see instructions on the reverse side.

(CFA-4) **Summary Sheet**

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION					
1. Full Name of Committee (as on Statement of Organization)					
Committee to Elect Erica Salmon Clerk Treasurer – Cumberland					
Acronym or Abbreviated Name (if any) 3. Con		mmittee Telephone Number			
(317		-403-2694)			
4. Mailing Address (address where all campaign finance correspondence is received)					
507 Oak Blvd South Drive					
5. City, State, ZIP Code Greenfield, IN 46140	6. Party Affiliation (if applicable) Republican				
CANDIDATE INFORMATION (For Candidate's Committees Only)					
7. Full Name of Candidate (include any nickname)		nt Candidate			
Erica Ann Salmon	Republican				
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. County of Residence Hancock				
Clerk Treasurer, Town of Cumberland	The second secon				
TYPE OF REPORT CONVENTION CANDIDATES ONLY					
11. Check one:	Check one:	ř.			
			vention		
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statement of	Organization	n) Post-Co	nvention		
12. Reporting Period: From: 10/10/2015 Through: 12/31/2015		COLUMN A This Period	COLUMN B Year to Date		
13. Cash on hand and investments at the beginning of this reporting period.		0	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
14. Cash on hand and investments January 1, current year.		0			
CONTRIBUTIONS AND RECEIPTS					
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		0			
15a. Itemized (use Schedule A)		0	0		
5b. Unitemized 5c. Add lines 15a and 15b in both columns SUBTOTAL		0	0		
	Managar Christian	0	0		
	OTAL	0	0		
(Note: These amounts include in-kind expenditures and loan repayments.)					
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		0	0		
17b. Unitemized		0	0		
	TOTAL	0	0		
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	0	0		
19. Debts OWED BY the committee (use Schedule D)		0	100		
20. Debts OWED TO the committee (use Schedule E)		0			
TOP OFFICE HOP ONLY					

CERTIFICATION				
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.				
Signature of Treasurer Crica Salmon	Title – Treasurer	Date 1/12/2016		
Signature of Candidate (if applicable)	ica Salvon	Date 1/12/2016		
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly				

files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

FOR OFFICE USE ONLY



JAN 1 3 2016 Myla a. Eldridge